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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (it known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Writ | Write the name that is on your government-issued picture identification (for example, your driver's | Quintina | |
| | pictu | | First name | First name |
| | | nse or passport). | Middle name | Middle name |
| | Brin | g your picture | Terry | |
| | | tification to your eting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | | other names you have d in the last 8 years | | |
| | | ude your married or den names. | | |
| 3. | you nun Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N) | xxx-xx-9150 | |

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Case number (if known)

Debtor 1 Quintina Terry

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 4542 Whitney Dr Hanover Park, IL 60133 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **DuPage** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Quintina Terry

| ar | Tell the Court About | Your B | ankruptcy Ca | se | | | |
|-----|--|-------------|-----------------|-----------------------------------|---|---|-------------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bar e box. | nkruptcy |
| | choosing to file under | ■ Chapter 7 | | | | | |
| | | □с | hapter 11 | | | | |
| | | □с | hapter 12 | | | | |
| | | □с | hapter 13 | | | | |
| | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Typ attorney is sub | pically, if you are paying the fee yo | k with the clerk's office in your local court for murself, you may pay with cash, cashier's checkalf, your attorney may pay with a credit card or | k, or money |
| | | | | | tallments. If you choose this optice to (Official Form 103A). | on, sign and attach the Application for Individua | als to Pay |
| | | | | | | n only if you are filing for Chapter 7. By law, a j | |
| | | | | | | ur income is less than 150% of the official poven installments). If you choose this option, you n | |
| | | | the Application | n to Have the (| Chapter 7 Filing Fee Waived (Office | cial Form 103B) and file it with your petition. | |
| | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | | | | | |
| | last 8 years? | □ Ye | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy | ■ No |) | | | | |
| | cases pending or being filed by a spouse who is | □ Ye | es. | | | | |
| | not filling this case with you, or by a business partner, or by an affiliate? | | | | | | |
| | | | Debtor | - | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No | Go to li | ne 12. | | | |
| | | □Y€ | es. Has yo | ur landlord obta | ained an eviction judgment agains | t you? | |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out In this bankruptc | | Judgment Against You (Form 101A) and file it | as part of |
| | | | | | | | |

| Debtor 1 | Quintina Terry | Document | Page 4 of 52 Case number (if known) | |
|----------|----------------|----------|-------------------------------------|------|
| ebtor 1 | Quintina Terry | Document | Case number (if known) | |

| ar | 3: Report About Any Bu | sinesses | You Own | as a Sole Proprieto | or | | |
|------|---|------------------------|--|-------------------------------------|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of busin | ness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, State | e & ZIP Code | | |
| | it to this petition. | | Check | the appropriate box | to describe your business: | | |
| | | | | Health Care Busine | ess (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real I | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as de | fined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broker | (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of his, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am n | ot filing under Chapt | er 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am fi | ling under Chapter 1 | 1 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Part | : 4: Report if You Own or | Have Any | Hazardo | us Property or Any | Property That Needs Immediate Attention | | |
| 4. | Do you own or have any | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is t | he hazard? | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | | iate attention is why is it needed? | | | |
| | immediate attention? | | nccueu, | wity is it fieducu! | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | | | |
| | | | | | Number, Street, City, State & Zip Code | | |

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Debtor 1 Quintina Terry

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Quintina Terry | | Document | Case nu | mber (if known) | |
|------|--|--|--------------------------------------|---|---|--|
| Part | 6: Answer These Quest | ions for Rep | orting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) individual primarily for a personal, family, or household purpose." | | | | |
| | | | No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | | | ss debts? Business debts are dent or through the operation of the | | |
| | | | No. Go to line 16c. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16c. S | tate the type of debts you owe th | at are not consumer debts or bus | iness debts | |
| 17. | Are you filing under Chapter 7? | □ No. I | am not filing under Chapter 7. Go | to line 18. | | |
| | Do you estimate that after any exempt | | | u estimate that after any exempt pe to distribute to unsecured credit | property is excluded and administrative expenses tors? | |
| | property is excluded and administrative expenses | | No | | | |
| | are paid that funds will be available for | |] Yes | | | |
| | distribution to unsecured creditors? | _ | - 100 | | | |
| 18. | How many Creditors do | 1 -49 | | □ 1,000-5,000 | □ 25,001-50,000 | |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | □ 50,001-100,000 | |
| | owe? | ☐ 100-199 | | □ 10,001-25,000 | ☐ More than 100,000 | |
| | | □ 200-999 | | | | |
| 19. | How much do you | \$0 - \$50 | 000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | estimate your assets to be worth? | □ \$50,001 | | □ \$10,000,001 - \$50 million | ☐ \$1,000,000,001 - \$10 billion | |
| | DC WOITH: | | 1 - \$500,000 | □ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion | |
| | | □ \$500,00 | 1 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | |
| 20. | How much do you | □ \$0 - \$50 | ,000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | estimate your liabilities to be? | \$50,001 | - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | |
| | to be: | □ \$100,00 | 1 - \$500,000 | □ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion | |
| | | □ \$500,00 | 1 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | |
| Part | 7: Sign Below | | | | | |
| For | you | I have exan | nined this petition, and I declare u | under penalty of perjury that the ir | nformation provided is true and correct. | |
| | | | | | ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. | |
| | | | | y or agree to pay someone who i ce required by 11 U.S.C. § 342(b | s not an attorney to help me fill out this). | |
| | | I request re | lief in accordance with the chapte | er of title 11, United States Code, | specified in this petition. | |
| | | bankruptcy and 3571. | case can result in fines up to \$25 | | ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, | |
| | | /s/ Quintin | | Cionatura of D | obtor 2 | |
| | | Quintina Signature o | | Signature of De | BUIUI Z | |
| | | Executed o | | Executed on | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | |
| | | | | | | |

Debtor 1 Quintina Terry

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Richard S. Bass | Date | April 18, 2018 |
|--|---------------|-----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Richard S. Bass 6189009 | | |
| Printed name | | |
| Law Office of Richard S. Bass LTD | | |
| Firm name | | |
| 2021 Midwest Road | | |
| Suite #200 | | |
| Oak Brook, IL 60523 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 630-953-8655 | Email address | rbass@corpoffices.com |
| 6189009 IL | | |
| Par number 9 Ctote | | |

| | | LAMAIIII | ., , , , , , , , , , , , , , , , , , , | |
|---------------------|-------------------------|-------------------|--|---------------------|
| Fill in this inforn | nation to identify your | case: | | |
| Debtor 1 | Quintina Terry | Middle Name | Last Name | |
| Dahtano | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 11: Summarize Your Assets | | |
|-----|--|--------------|-------------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 21,991.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 21,991.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 16,933.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 55,350.00 |
| | Your total liabilities | \$ | 72,283.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,855.34 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,716.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a personal, | family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14. |

2,795.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cla | im |
|--|-----------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Debto | | | Document | Page 10 of 52 | | | |
|-----------------------------|---|--|---|--|---|--|--|
| Debto | this inform | ation to identify your | case and this filing: | | | | |
| | or 1 | Quintina Terry | | | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debto | or 2 e, if filing) | First Name | Middle Name | Last Name | | | |
| | | | | | | | |
| Unite | d States Ban | kruptcy Court for the: | NORTHERN DISTRICT OF ILLI | NOIS | | | |
| Case | number | | | | | ☐ Check if this is ar | |
| | | | | | | amended filing | |
| | | | | | | | |
| Ott: | aial Far | 10CA/D | | | | | |
| _ | | m 106A/B | | | | | |
| Scl | hedule | e A/B: Prop | erty | | | 12/15 | |
| think it inform Answe | t fits best. Be ation. If more r every questi | as complete and accura space is needed, attach on. | pe items. List an asset only once. If a same as possible. If two married people a separate sheet to this form. On the | le are filing together, both a ne top of any additional pag | re equally responsible for su | pplying correct | |
| Part 1 | : Describe E | ach Residence, Building | g, Land, or Other Real Estate You Ov | wn or Have an Interest In | | | |
| 1. Do : | you own or ha | ve any legal or equitabl | e interest in any residence, building | յ, land, or similar property? | | | |
| | | _ | | | | | |
| | No. Go to Part | | | | | | |
| ЦΥ | Yes. Where is | the property? | | | | | |
| Part 2 | Describe Y | our Vehicles | | | | | |
| | | | | | | | |
| 3.1 | Make: N | issan | Who has an interest in th | ne property? Check one | Do not deduct secured cla | • | |
| | | entra | Debtor 1 only | p. opoly . Oneokono | the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property. | | |
| | | 017 | Debtor 2 only | | Current value of the | ms Secured by Property. | |
| | Approximate | mileage: | ☐ Debtor 1 and Debtor 2 | | Carrent value of the | | |
| | Other informa | | | only | entire property? | Current value of the portion you own? | |
| | | | At least one of the debt | • | entire property? | Current value of the | |
| | Location: | 4542 Whitney Dr, Park IL 60133 | ☐ At least one of the debt☐ ☐ Check if this is comm (see instructions) | tors and another | entire property? \$15,000.00 | Current value of the | |
| | Location: Hanover F | 4542 Whitney Dr, Park IL 60133 | Check if this is comm (see instructions) | tors and another | \$15,000.00 | Current value of the portion you own? | |
| 3.2 | Location: Hanover F | 4542 Whitney Dr, Park IL 60133 | Check if this is comm (see instructions) Who has an interest in the | tors and another | \$15,000.00 Do not deduct secured cluthe amount of any secure | Current value of the portion you own? \$15,000.00 | |
| 3.2 | Make: Ir | 4542 Whitney Dr, Park IL 60133 Infinity | Check if this is comm (see instructions) Who has an interest in the Debtor 1 only | tors and another | \$15,000.00 Do not deduct secured clause amount of any secure Creditors Who Have Claim | Current value of the portion you own? \$15,000.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. | |
| 3.2 | Make: Ir Model: Q Year: 2 | 4542 Whitney Dr, Park IL 60133 Infinity 35 | □ Check if this is comm (see instructions) Who has an interest in the □ Debtor 1 only □ Debtor 2 only | nunity property ne property? Check one | \$15,000.00 Do not deduct secured claim the amount of any secure Creditors Who Have Claim Current value of the | Current value of the portion you own? \$15,000.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the | |
| 3.2 | Make: Ir | 4542 Whitney Dr, Park IL 60133 Infinity 35 0003 Imileage: | Check if this is comm (see instructions) Who has an interest in the Debtor 1 only | nunity property ne property? Check one only | \$15,000.00 Do not deduct secured clause amount of any secure Creditors Who Have Claim | Current value of the portion you own? \$15,000.00 aims or exemptions. Put d claims on Schedule Doms Secured by Property. | |
| 3.2 | Make: Ir Model: Q Year: 20 Approximate | 4542 Whitney Dr, Park IL 60133 Infinity 35 0003 Imileage: | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | nunity property ne property? Check one only | \$15,000.00 Do not deduct secured claim the amount of any secure Creditors Who Have Claim Current value of the | Current value of the portion you own? \$15,000. aims or exemptions. Put d claims on Schedule Ems Secured by Property Current value of the | |

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document **Quintina Terry** Debtor 1 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$15,300.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Misc used household goods and furnishings \$1,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Misc used personal clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$150.00 Misc assorted common used personal costume jewelry, watch

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

| | Case 18-11428 | Doc 1 | Filed 04/19/18 | | 2:25:24 | Desc Main |
|-------------|---|----------------|---|--|-----------------|--|
| Debtor 1 | Quintina Terry | | Document | Page 12 of 52 Case numb | oer (if known) | |
| | he dollar value of all of y art 3. Write that number | | | ny entries for pages you have a | ittached | \$1,650.00 |
| Part 4: Des | scribe Your Financial Asset | s | | | | |
| Do you ow | n or have any legal or e | quitable inter | est in any of the follow | ring? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | les: Money you have in y | | | osit box, and on hand when you fil | le your petitio | חכ |
| | | | | Cash | | \$100.00 |
| | | | al accounts; certificates of counts with the same ins | of deposit; shares in credit unions, titution, list each. | , brokerage h | nouses, and other similar |
| Yes | | | Institution r | name: | | |
| | 17.1. | Checking | Chase Ba | ank N.A. | | \$220.00 |
| | 17.2. | Savings | Chase Ba | ank N.A. Minor Account | | \$120.00 |
| | 17.3. | Checking | U.S. Ban | Κ | | \$500.00 |
| | 17.4. | Savings | U.S. Ban | Κ | | \$2,000.00 |
| | | | | | | |

18. Bonds, mutual funds, or publicly traded stocks

| Evamples: Bond funds | investment accounts | with brokerage firms | money market accounts |
|-------------------------|---------------------------|------------------------|-------------------------|
| LAGITIDIES, DONG TUNGS. | . IIIVESIIIEIII accouilis | WILL DIONELAGE IIIIIS. | THOREV HIAIKEL ACCOUNTS |

■ No

☐ Yes...... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

 $20. \ \, \textbf{Government} \ \text{and corporate bonds and other negotiable and non-negotiable instruments}$

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

■ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

■ Yes. List each account separately.

Type of account:

Institution name:

Pension Illinoi Teacher Retirement \$1,000.00

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Case number (if known) Document Debtor 1 **Quintina Terry** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. Rent Security deposit with landlord \$1,100.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them...

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... portion you own? ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information......

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property 27. Licenses, franchises, and other general intangibles Current value of the Money or property owed to you? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you 29. Family support 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Life Insuarnce (Term Policy) **Debtor son** \$1.00

Official Form 106A/B Schedule A/B: Property page 4
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 Quintina Terry
 Page 14 of 52 | Case number (if known)
 Case number (if known)

| • | Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to rec someone has died. No | eive property because |
|--------------|--|--------------------------|
| | Yes. Give specific information | |
| | Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue | |
| | Yes. Describe each claim | |
| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to | set off claims |
| | No Describe each daire | |
| L | ☐ Yes. Describe each claim | |
| | Any financial assets you did not already list ■ No | |
| | ■ No ☐ Yes. Give specific information | |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | \$5,041.00 |
| | for Part 4. Write that number here | ψ3,041.00 |
| Part | 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. I | Oo you own or have any legal or equitable interest in any business-related property? | |
| | No. Go to Part 6. | |
| | Yes. Go to line 38. | |
| | | |
| Part | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | No. Go to Part 7. | |
| | ☐ Yes. Go to line 47. | |
| | | |
| Part | Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | |
| I | ■ No | |
| | Yes. Give specific information | |
| 54 | Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| 01. | That the donal value of all of your others it is in the that that had been noted in the minimum. | Ψ0.00 |
| Part | 8: List the Totals of Each Part of this Form | |
| 55. | Part 1: Total real estate, line 2 | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 \$15,300.00 | |
| 57. | | |
| 58. | Part 4: Total financial assets, line 36 \$5,041.00 | |
| 59. | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 \$0.00 | |
| 61. | Part 7: Total other property not listed, line 54 + \$0.00 | |
| 62. | Total personal property. Add lines 56 through 61 \$21,991.00 Copy personal property to | total \$21,991.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | \$21,991.00 |
| | | |

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|-------------|--|
| Debtor 1 | Quintina Terry | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| | Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | |
|--|---|--------------------------------------|--|---|------------------------------------|--|
| | Copy the value from Schedule A/B | | Check only one box for each exemption. | | | |
| | 2017 Nissan Sentra Location: 4542 Whitney Dr, Hanover | \$15,000.00 | | \$2,100.00 | 735 ILCS 5/12-1001(c) | |
| | Park IL 60133 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 2003 Infinity Q35 Location: 4542 Whitney Dr, Hanover | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(c) | |
| | Park IL 60133 Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Misc used household goods and furnishings | \$1,000.00 | | \$0.00 | 735 ILCS 5/12-1001(b) | |
| | Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Misc used personal clothing Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(a) | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Misc assorted common used personal costume jewelry, watch | \$150.00 | | \$150.00 | 735 ILCS 5/12-1001(b) | |
| | Line from Schedule A/B: 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

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Lintina Terry Case number (if known)

| De | Quillina lefty | | | | |
|----|--|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Cash Line from Schedule A/B: 16.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| | Line nom Schedule A/B. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: Chase Bank N.A. Line from Schedule A/B: 17.1 | \$220.00 | | \$220.00 | 735 ILCS 5/12-1001(b) |
| | Ellie Holli Genedale Av.B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Savings: Chase Bank N.A. Minor Account | \$120.00 | | \$120.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: U.S. Bank Line from Schedule A/B: 17.3 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| | Line nom schedule A/B. 11.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Savings: U.S. Bank Line from Schedule A/B: 17.4 | \$2,000.00 | | \$2,000.00 | 735 ILCS 5/12-1001(b) |
| | Line nom schedule AVD. 17.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Pension: Illinoi Teacher Retirement Line from Schedule A/B: 21.1 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1006 |
| | Line Hom Schedule AVB. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Rent: Security deposit with landlord Line from Schedule A/B: 22.1 | \$1,100.00 | | \$1,100.00 | 735 ILCS 5/12-1001(b) |
| | Ellie IIIIII Schedule AV.D. 22.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Life Insuarnce (Term Policy) Beneficiary: Debtor son | \$1.00 | | \$1.00 | 215 ILCS 5/238 |
| | Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property covers □ No □ No | 3 years after that for ca | ases fi | · | , |
| | ☐ Yes | | | | |

| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, med) Judgment lien from a lawsuit Other (including a right to offset) | : Check all that s mortgage or secuechanic's lien) | ured | | |
|-----------|---|--|---|-----------------------------------|--|-----------------------------|
| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me | : Check all that s mortgage or secuechanic's lien) | | | |
| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me | : Check all that | ured | | |
| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) | : Check all that | ured | | |
| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as | : Check all that | ured | | |
| Who | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. | : Check all that | | | |
| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 Number, Street, City, State & Zip Code | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent Unliquidated Disputed | | | | |
| | Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366 | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. Contingent | | | | |
| | Attn: Bankruptcy Dept PO BOX 660366 | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: apply. | | | | |
| | Attn: Bankruptcy Dept PO BOX 660366 | Location: 4542 Whitney Dr, Park IL 60133 As of the date you file, the claim is: | | | | |
| | | Location: 4542 Whitney Dr, | Hanover | | | |
| | ordano o riamo | | | | | |
| | Creditor's Name | 2017 Nissan Sentra | | | | |
| 2.1 | Acceptance | Describe the property that secures | the claim: | \$16,933.00 | \$15,000.00 | \$1,933.0 |
| <u> </u> | Nissan Motor | | | value of collateral. | claim | If any |
| | each claim. If more than one creditor has the as possible, list the claims in alphabet | | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | ist all secured claims. If a creditor has | | | Column A | Column B | Column C |
| Part | t 1: List All Secured Claims | | | | | |
| | Yes. Fill in all of the information | below. | | | | |
| | ☐ No. Check this box and submit t | his form to the court with your other | r schedules. Yo | ou have nothing else t | o report on this form. | |
| | any creditors have claims secured b | , , , , | | | | |
| umk | ber (if known). | · | to this form. On | Time top of any addition | nai pages, write your na | ille allu case |
| | s complete and accurate as possible. eded, copy the Additional Page, fill it | | | | | |
| <u>Sc</u> | hedule D: Creditors | Who Have Claims | Secured | by Propert | у | 12/15 |
| | icial Form 106D | | | | | |
| | | | | | | g |
| (if kno | own) | | | | | if this is an ded filing |
| | se number | | | | | |
| Unit | ted States Bankruptcy Court for the | NORTHERN DISTRICT OF ILI | LINOIS | | | |
| | | | | | | |
| | otor 2 use if, filing) First Name | Middle Name | Last Name | | | |
| | First Name | Middle Name | Last Name | | | |
| Deb | otor 1 Quintina Terry | | | | | |
| D . I | in this information to identify you | ır case: | | | | |
| | In this information to bloodifferen | | | | | |
| | to this before all on to blood to and | Document | Page 17 | of 52 | | |

\$16,933.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$16,933.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| - O | 430 10 11-20 1 | Document | Page | 18 of 52 | .24 Describan |
|---|---|---|-----------------------------------|--|---|
| Fill in this info | rmation to identify your | case: | | | |
| Debtor 1 | Quintina Terry | | | | |
| Deptor 1 | First Name | Middle Name | Last Name |) | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | 1 | |
| United States B | sankruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official For | | | | | |
| Schedule | E/F: Creditors W | ho Have Unsecure | d Claims | 3 | 12/15 |
| Schedule G: Exec Schedule D: Cred left. Attach the Co name and case no | cutory Contracts and Unexp litors Who Have Claims Sec ontinuation Page to this pag umber (if known). | ired Leases (Official Form 106G) ured by Property. If more space i e. If you have no information to | . Do not inclui is needed, cop | ide any creditors with partially s py the Part you need, fill it out, | Property (Official Form 106A/B) and on secured claims that are listed in number the entries in the boxes on the op of any additional pages, write your |
| | All of Your PRIORITY Un | | | | |
| | itors have priority unsecure | d claims against you? | | | |
| No. Go to | Part 2. | | | | |
| ☐ Yes. | | | | | |
| Part 2: List | All of Your NONPRIORIT | Y Unsecured Claims | | | |
| _ ` | itors have nonpriority unsect | art. Submit this form to the court wi | ith your other s | chedules. | |
| 4. List all of yo unsecured cla | aim, list the creditor separately | | ted, identify what | nat type of claim it is. Do not list cla | or has more than one nonpriority aims already included in Part 1. If more laims fill out the Continuation Page of |
| | | | | | Total claim |
| | itist Glen Oaks Hospit | Last 4 digits of a | ccount numbe | er | \$2,675.00 |
| | rity Creditor's Name | When was the de | obt inquerod? | 2017 | |
| | tient Accts | When was the de | ibt incurred r | 2017 | |
| | rook, IL 60522 | | | | |
| Number | Street City State Zlp Code | As of the date yo | u file, the clai | im is: Check all that apply | |
| Who inc | curred the debt? Check one. | | | | |
| ■ Debt | or 1 only | ☐ Contingent | | | |
| ☐ Debt | or 2 only | ☐ Unliquidated | | | |
| ☐ Debt | or 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At lea | ast one of the debtors and and | other Type of NONPRIO | ORITY unsecu | ıred claim: | |
| ☐ Chec | ck if this claim is for a com | munity | | | |
| debt | | | | eparation agreement or divorce th | nat you did not |
| | aim subject to offset? | report as priority o | | | |
| No | | ■ Debts to pensi | • | aring plans, and other similar debi | ts |
| ☐ Yes | | Other. Specify | Medical | | |

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Case number (if know)

| Quintina Terry | | |
|---|---|--|
| Capital One | Last 4 digits of account number | \$4,638.00 |
| Attn: Bankruptcy Dept | When was the debt incurred? 2013-2018 | |
| Salt Lake City, UT 84130-0285 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| _ | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | <u> </u> | |
| Check if this claim is for a community | | |
| | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| • • • | Other Specific Credit Account | |
| | - Other. Specify | |
| Chase Card Services | Last 4 digits of account number | \$2,070.00 |
| • • | When was the debt incurred? 2013-2018 | |
| Mark Pascale Mail Stop DE1-1406 | | |
| Wilmington, DE 19801-2920 | As file been file desired to the second | |
| | As of the date you file, the claim is: Check all that apply | |
| | Пол | |
| _ | | |
| | | |
| | · | |
| | <u> </u> | |
| debt | _ ***** | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify Credit Account | |
| | | |
| Chase Card Services | Last 4 digits of account number | \$5,160.00 |
| | When was the debt incurred? 2012.2019 | |
| | When was the dest incurred: | |
| Wilmington, DE 19801-2920 | _ | |
| • | As of the date you file, the claim is: Check all that apply | |
| _ | | |
| | | |
| _ ′ | | |
| | · | |
| | | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify Credit Account | |
| | Capital One Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 30285 Salt Lake City, UT 84130-0285 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Chase Card Services Nonpriority Creditor's Name 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Chase Card Services Nonpriority Creditor's Name 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt Last one of the debtors and another Check if this claim is for a community debt Last one of the debtors and another Check if this claim is for a community debt Last one of the debtors and another Check if this claim is for a community debt Last one of the debtors and another Check if this claim is for a community debt Last one of the debtors and another Check if this claim is for a community debt Last one of the debtors and another | Capital One Norprority Creditor's Name Attn: Bankruptcy Dept PO BOX 30285 Sait Lake City, UT 84130-0285 Number Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred the debt? Check one. Seption Street City, State Zip Code Who Incurred To State Zip |

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| 200101 | Quintina Terry | | Case number (if know) | | | | | |
|--------|--|--|--|------------|--|--|--|--|
| 4.5 | Chase Card Services | Last 4 digits of account number | | \$2,213.00 | | | | |
| | Nonpriority Creditor's Name 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920 | When was the debt incurred? | 2013-2018 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | paration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | | |
| | Yes | Other. Specify Credit Acc | count | | | | | |
| 4.6 | Chase Card Services | Last 4 digits of account number | | \$751.00 | | | | |
| | Nonpriority Creditor's Name 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 | When was the debt incurred? | 2013-2018 | | | | | |
| | Wilmington, DE 19801-2920 Number Street City State Zlp Code | As of the date you file, the claim | | | | | | |
| | Who incurred the debt? Check one. | • | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | | | | |
| | ☐ Check if this claim is for a community debt | Student loans | | | | | | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | | |
| | Yes | Other. Specify Credit Acc | count | | | | | |
| 4.7 | Citi | Last 4 digits of account number | | \$4,121.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept | When was the debt incurred? | 2013-2018 | | | | | |
| | PO BOX 6500 Sioux Falls, SD 57117 | | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | |
| | Debtor 1 only | Пол | | | | | | |
| | ′ | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed☐ | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepreport as priority claims | paration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-shari | ing plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Credit Acc | count | | | | | |
| | ■ No | <u></u> | 01 , | | | | | |

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Case number (if know)

| DCDIO | Quintina rerry | Odsc Humber (II know) | |
|-------|---|---|------------|
| 4.8 | Citi | Last 4 digits of account number | \$1,457.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept | When was the debt incurred? 2013-2018 | |
| | PO BOX 6500 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit Account | |
| 4.9 | Citi | Last 4 digits of account number | \$1,246.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 6500 | When was the debt incurred? 2013-2018 | . , |
| | Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | Other. Specify Credit Account | |
| 4.1 | Comenity Bank/Ashley Stewart | Last 4 digits of account number | \$443.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 182125 | When was the debt incurred? 2013-2018 | |
| | Columbus, OH 43218-2125 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | | |
| | Yes | ■ Other. Specify Credit Account | |

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| Quintina Terry | Case number (if know) | |
|---|---|------------|
| Comenity Bank/Capital One Fore | Last 4 digits of account number | \$608.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 182125 | When was the debt incurred? 2013-2018 | |
| Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Account | |
| Comenity Bank/Carsons Nonpriority Creditor's Name | Last 4 digits of account number | \$2,526.00 |
| Attn: Bankruptcy Dept PO Box 182125 | When was the debt incurred? 2013-2018 | |
| Columbus, OH 43218-2125 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the dain is. Oneck all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Account | |
| Comenity Bank/Victoria s Secret | Last 4 digits of account number | \$310.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept | When was the debt incurred? 2013-2018 | |
| PO Box 182125 Columbus, OH 43218-2125 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | |
| No | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | |
| Yes | ■ Other. Specify Credit Account | |

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Case number (if know)

| Dobic | Quintina Terry | - Case Hamber (II know) | |
|----------|---|---|------------|
| 4.1 4 | Comenity/Meijer | Last 4 digits of account number | \$818.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 182125 | When was the debt incurred? 2013-2018 | |
| | Columbus, OH 43218-2125 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the damins. Offeck all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ No | | |
| | Yes | ■ Other. Specify Credit Account | |
| 4.1 5 | DuPage Dental Care Nonpriority Creditor's Name | Last 4 digits of account number 0088 | \$2,150.00 |
| | 206 N. Gary Ave RE: Patient Accts | When was the debt incurred? 2018 | |
| | Carol Stream, IL 60188 | | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Medical | |
| 4.1 | F' 1 | | *** |
| 6 | Firdaus Jafri DDS Nonpriority Creditor's Name | Last 4 digits of account number | \$290.00 |
| | 206 N. Gary Ave RE Patient Accts | When was the debt incurred? 2018 | |
| | Carol Stream, IL 60188 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Medical | |
| | | | |

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Debtor 1 Quintina Terry Case number (if know) 4.1 \$720.00 **Kohls** Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept 2013-2018 When was the debt incurred? PO BOX 3043 Milwaukee, WI 53201-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Account ☐ Yes 4.1 Macy s \$1,108.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Processing 2013-2018 When was the debt incurred? PO BOX 8053 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Account ☐ Yes 4.1 **Navient Student Loan Svcs** \$9,449.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? 2013-2018 PO BOX 9500 Wilkes Barre, PA 18773-9500 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Student Loan ☐ Yes

Official Form 106 E/F

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| Debit | Quintina Terry | Case number (if know) | |
|-------|---|--|------------|
| 4.2 | Sears/CBNA | Last 4 digits of account number | \$4,115.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 6282 | When was the debt incurred? 2013-2018 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? — | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | ot |
| | ■ No □ Yes | □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Account | |
| 4.2 | Synchrony/BP | Last 4 digits of account number | \$282.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 965061 | When was the debt incurred? 2013-2018 | |
| | Orlando, FL 32896-5061 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | ot |
| | ☐ Yes | Other. Specify Credit Account | |
| 4.2 | Synchrony/JC Penney | Last 4 digits of account number | \$4,138.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 965061 | When was the debt incurred? 2013-2018 | |
| | Orlando, FL 32896-5061 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ | Obligations arising out of a separation agreement or divorce that you did no report as priority claims | ot |
| | ■ No □ Yes | □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Account | |
| | | Outlot. Opcony | |

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| Debto | or 1 Quintina Terry | Case number (if know) | |
|----------|--|---|-------------------|
| 4.2 | Synchrony/Wal Mart | Last 4 digits of account number | \$1,993.00 |
| 3 | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 965061 | When was the debt incurred? 2013-2018 | \$1,000.00 |
| | Orlando, FL 32896-5061 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Type of NONPRIORITY unsecured claim: Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Account | |
| 4.2 | Synchrony/Wal Mart | Last 4 digits of account number | \$532.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 965061 | When was the debt incurred? 2013-2018 | |
| | Orlando, FL 32896-5061 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Account | |
| 4.2 5 | Target National Bank | Last 4 digits of account number | \$1,537.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 660170 | When was the debt incurred? 2013-2018 | |
| | Dallas, TX 75266-0170 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other Specify Credit Account | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Quintina Terry

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 7 | Total Claim |
|-----------------------|-----|--|-----|--------|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ ——— | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | ou. | one: Add all other priority dissecured claims. Write that amount here. | ou. | Ψ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | |
| | | | | 7 | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | 6g. | \$ | 0.00 |
| | 6h. | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount | 6i. | Ψ | |
| | Oi. | here. | 01. | \$ | 55,350.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 55,350.00 |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Quintina Terry | AP. III. N | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

| | | Docume | ent Page 29 d | ot 52 | |
|----------------|---|---|---|---|--|
| Fill in thi | s information to identify your | case: | | | |
| Debtor 1 | Quinting Torry | | | | |
| Debior 1 | Quintina Terry First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fi | lling) First Name | Middle Name | Last Name | _ | |
| United St | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | , , | | | | |
| Case nun | nber | | | | — 01 1 7 7 1 1 1 |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | amended ming |
| Officia | al Form 106H | | | | |
| | dule H: Your Cod | lobtoro | | | 40/45 |
| Sche | dule H. Your Cod | enrois | | | 12/15 |
| ■ No□ Ye | | u lived in a community pr | operty state or territo | ry? (Community property | v states and territories include |
| 3. In Co | e 2 again as a codebtor only n 106D), Schedule E/F (Officia | tors. Do not include your if that person is a guaran | spouse as a codebto tor or cosigner. Make | sure you have listed th | g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| out | Column 2. | | | | |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cre Check all schedule | ditor to whom you owe the debt |
| | ,,,,,, | | | Officer all sofficials | s triat apply. |
| 3.1 | | | | ☐ Schedule D, line | e |
| | Name | | | ☐ Schedule E/F, li | ne |
| | | | | ☐ Schedule G, line | e |
| | Number Street | | | | |
| | City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | |
| 0.2 | Name | | | Schedule E/F, li | |
| | | | | ☐ Schedule G, line | |
| | | | | | <u> </u> |
| | Number Street | Chata | 710.0-4- | | |
| | City | State | ZIP Code | | |

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| Eill | in this information to identify your c | asa. | | | I | | | |
|--------------------|--|-------------------------------|--|------------------------------|----------------------|-----------------------|------------------------------|----------------------------------|
| | otor 1 Quintina Tel | | | | | | | |
| | otor 2 ouse, if filing) | | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | |
| (If kr | se number nown) | | | | □ An | | J | oostpetition chapter wing date: |
| | fficial Form 106l | | | | M | // DD/ Y | YYY | |
| S | chedule I: Your Inc | ome | | | | | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, and your s ith you, do not includ | pouse is liv e informatio | ing with yon about y | ou, inclu your spo | ide informat use. If more | tion about your space is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-filing | g spouse |
| | If you have more than one job, | Employment status | ■ Employed | | | ☐ Emplo | yed | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | | ☐ Not er | nployed | |
| | employers. | Occupation | Temp-Authorizat | ion Clerk | CVS | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Medix Staffing S | olutions | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 222 S. Riverside Chicago, IL 6060 | | 120 | | | |
| | | How long employed t | here? 5 mos | | | _ | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | port for any I | line, write | \$0 in the | space. Includ | de your non-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | for all emplo | oyers for th | nat perso | n on the lines | s below. If you need |
| | | | | | For Debt | or 1 | For Debto | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. \$ | 2,7 | 795.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | | 3. +\$ | | 0.00 | +\$ | N/A |

2,795.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1 | Quintina Terry | - | C | Case i | number (<i>if kn</i> e | own) | | | | |
|-----|----------------------------|---|----------|----|-------------|-------------------------|-------|----------|--------------------|-----------------------|-----------------|
| | | | | | | Debtor 1 | | non- | Debtor filing s | pouse | |
| | Cop | by line 4 here | 4. | | \$ | 2,795 | .00 | \$ | | N/A | - |
| 5. | List | t all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ١. | \$ | 498 | .33 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | ٠. | \$ | 0 | .00 | \$ | | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 5c | | \$ | 0 | .00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | | .00 | \$ | | N/A | - |
| | 5e. | Insurance | 5e | | \$ | 173 | | \$ | | N/A | - |
| | 5f. | Domestic support obligations Union dues | 5f. | | \$ \$ | | .00 | \$ | | N/A | - |
| | 5g. 5h. | Other deductions. Specify: Disability Insurance | 5g 5h | | \$ — | | .00 | + \$ | | N/A N/A | - |
| | | | _ | | · — | | | · - | - | | = |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 684 | | \$ | | N/A | - |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 2,110 | .34 | \$ | | N/A | - |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 90 | | c | | 00 | c | | AL/A | |
| | 8b. | monthly net income. Interest and dividends | 8a 8b | | \$ \$ | | .00 | \$ | | N/A N/A | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | OD | | Ψ_ | U | .00 | Ψ | | IN/A | - |
| | | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | ·. | \$ | 0 | .00 | \$ | | N/A | |
| | 8d. | | 8d | | <u>*</u> — | | .00 | \$ | | N/A | - |
| | 8e. | Social Security | 8e | ٠. | \$ | | .00 | \$ | | N/A | - |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Social security for minor son | 8f. | | \$ | 745 | | \$ | | N/A | - |
| | 8g. | Pension or retirement income | 8g | | \$ | | .00 | \$ | | N/A | - |
| | 8h. | Other monthly income. Specify: | _ 8h | .+ | \$ | 0 | .00 | + \$ | | N/A | - |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | <u> </u> | 745 | .00 | \$ | | N/A | A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 2,855.34 | + \$ | | N/A | = \$ | 2,855.34 |
| | | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ψ_ | | 2,033.34 | . *- | | -17/ | $\neg ^{\bullet} -$ | 2,000.04 |
| 11. | Star Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify: | depe | | , | , | | • | chedule 11. | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | 12. | \$ | 2,855.34 |
| 13. | Do | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | | Combir monthl | ned y income |
| | _ | Value Familiate | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| | in this informa | tion to identify | our again | | | Ī | | |
|------------|-------------------------------|-------------------------------------|-----------------------------|--|--|--------------|-------------------------------------|--|
| | | tion to identify yo | our case: | | | | | |
| Deb | tor 1 | Quintina Ter | ry | | | | ck if this is: | |
| Deb | otor 2 | | | | | | An amended filing A supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | _ | 13 expenses as of | |
| Unit | ed States Bankr | uptcy Court for the: | : NORTH | IERN DISTRICT OF ILLI | NOIS | | MM / DD / YYYY | |
| l | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | • | | |
| So | chedule | J: Your I | Exper | ises | | | | 12/15 |
| Be info | as complete a | and accurate as | possible eded, atta | . If two married people a | | | | |
| Par | | ibe Your House | hold | | | | | |
| 1. | Is this a join | nt case? | | | | | | |
| | ■ No. Go to □ Yes. Doe | | in a separ | ate household? | | | | |
| | □ N | | st file Offic | al Form 106J-2, <i>Expense</i> | es for Separate House | ehold of Deb | otor 2. | |
| 2. | | | _ | . , | • | | | |
| ۷. | • | e dependents? | □ No | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relating Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | _ | | | □ No |
| | dependents | names. | | | Son | | 17yr | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | Do your exp | enses include | | No | | | | _ 100 |
| | | f people other tl d your depende | han $_{oldsymbol{\square}}$ | Yes | | | | |
| Est exp | imate your ex | | our bankr | uptcy filing date unless | | | | pter 13 case to report f the form and fill in the |
| the | | n assistance and | | government assistance cluded it on <i>Schedule I:</i> | | | Your exp | enses |
| 4. | | or home owners | | ses for your residence. | . Include first mortgag | e 4. S | \$ | 851.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. S | \$ | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. S | · | 0.00 |
| | • | • | | ıpkeep expenses | | 4c. S | \$ | 0.00 |
| | 4d. Home | owner's associat | ion or con | dominium dues | | 4d. S | | 0.00 |
| 5. | Additional n | nortgage payme | ents for vo | our residence, such as h | nome equity loans | 5. 9 | \$ | 0.00 |

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| ebtor 1 | Quintina Terry | Case num | ber (if known) | |
|----------|---|---------------|----------------|-------------------------|
| . Utilit | ries: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 100.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 150.00 |
| 6d. | Other. Specify: | 6d. | · | 0.00 |
| | d and housekeeping supplies | 7. | · | 650.00 |
| | dcare and children's education costs | 8. | \$ | 20.00 |
| | | 9. | \$ | |
| | hing, laundry, and dry cleaning onal care products and services | 9. 10. | \$ | 60.00 |
| | · | | | 50.00 |
| | ical and dental expenses | 11. | \$ | 20.00 |
| | sportation. Include gas, maintenance, bus or train fare. ot include car payments. | 12. | \$ | 300.00 |
| | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 25.00 |
| | ritable contributions and religious donations | | · | 25.00 |
| 5. Insu | - | 14. | Ψ | 23.00 |
| | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | · | 150.00 |
| | Other insurance. Specify: | 15d. | | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | Ψ | 0.00 |
| Spec | | 16. | \$ | 0.00 |
| | allment or lease payments: | | · | 0.00 |
| | Car payments for Vehicle 1 | 17a. | \$ | 290.00 |
| | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | Other. Specify: | 17c. | · | 0.00 |
| | Other. Specify: | 17d. | · | 0.00 |
| | r payments of alimony, maintenance, and support that you did not report a | | Ψ | 0.00 |
| | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106) | | \$ | 0.00 |
| | er payments you make to support others who do not live with you. | ,- | \$ | 0.00 |
| Spec | | 19. | | |
| | er real property expenses not included in lines 4 or 5 of this form or on Sc | hedule I: Yo | ur Income. | |
| | Mortgages on other property | 20a. | | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Othe | er: Specify: Student Loan | 21. | · | 25.00 |
| . 56 | ottudent Louis | | · Ψ | 25.00 |
| | ulate your monthly expenses | | | |
| | Add lines 4 through 21. | | \$ | 2,716.00 |
| 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 2 | \$ | |
| 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,716.00 |
| | | | | , |
| | ulate your monthly net income. | | • | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | · | 2,855.34 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,716.00 |
| 60 | Out the state of the second from the second | | | |
| 23c. | Subtract your monthly expenses from your monthly income. | 23c. | \$ | 139.34 |
| | The result is your monthly net income. | ۷۵۰. | <u> </u> | 100.04 |
| 4 Dov | ou expect an increase or decrease in your expenses within the year after | vou file this | form? | |
| | xample, do you expect to finish paying for your car loan within the year or do you expect yo | | | e or decrease because o |
| | ication to the terms of your mortgage? | 3-3-1 | | |
| ■ N | 0. | | | |
| □ Ye | | | | |

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| Fill in this info | rmation to identify your | case: | | | | | | |
|--|---|---|--------------------------|-------------------------|---|--|--|--|
| Debtor 1 | Quintina Terry | | | | | | | |
| Dobto: 1 | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing | | | |
| Official For | | ın Individual | Debtor's Sc | hedules | 12/15 | | | |
| You must file the obtaining mone years, or both. | is form whenever you fi | le bankruptcy schedules n connection with a bank | | Making a false state | ement, concealing property, or 00, or imprisonment for up to 20 | | | |
| Did you pa | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| ■ No | | | | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) | | | |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules filed | d with this declaration | on and | | | |
| X /s/ Qu | intina Terry | | X | | | | | |

Quintina TerrySignature of Debtor 1

Date April 18, 2018

Signature of Debtor 2

Date

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| Fill i | n this inform | ation to identify you | r case. | | | |
|---|---|--|---|---|--|---|
| Debt | | | case. | | | |
| Deni | OI I | Quintina Terry First Name | Middle Name | Last Name | | |
| Debt | | First Name | Middle Name | Last Name | | |
| | se if, filing) | | | | | |
| Unite | ed States Bar | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case (if know | e number wn) | | | | _ | Check if this is an amended filing |
| Sta Be as | complete a | of Financial And accurate as possione space is needed, | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup additional pages, write yo | |
| numk | |). Answer every ques etails About Your Ma | stion. rital Status and Where You | Lived Before | | |
| | | current marital statu | | | | |
| [| ☐ Married■ Not married | ied | | | | |
| 2. I | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territor co, Texas, Washington and V | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Sch</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part | 2 Explain | n the Sources of You | r Income | | | |
| F | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? |
| l I | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | | ■ Wages, commissions, bonuses, tips | \$8,227.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Case number (if known) Debtor 1 Quintina Terry

| | | | | Debtor 1 | | Debtor 2 | | |
|---|----------------------------------|--|---|--|--|---|---|---|
| | | | | Sources of income | Gross income | Sources of inco | me | Gross income |
| | | | | Check all that apply. | (before deductions and exclusions) | Check all that ap | | (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2017) | | ■ Wages, commissions, bonuses, tips | \$176,899.00 | ☐ Wages, comr bonuses, tips | nissions, | | | |
| | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | |
| | | | before that: er 31, 2016) | ■ Wages, commissions, bonuses, tips | \$21,076.00 | ☐ Wages, comr bonuses, tips | nissions, | |
| | | | | ☐ Operating a business | | ☐ Operating a b | usiness | |
| | and other winnings. List each s | public be f you are | nefit payments; filing a joint cand the gross inco | her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa | rest; dividends; money collect you received together, list it o | cted from lawsuits; r only once under Del | oyalties; and otor 1. | |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) |
| | | | before that: er 31, 2016) | Pension Disbursement | \$771.00 | | | |
| Pa 6. | Are either No. | Debtor Neither individu During t No Yes * Subje | 1's or Debtor 2 Debtor 1 nor I al primarily for a the 90 days before Go to line 7 S List below paid that connot include ent to adjustment 1 or Debtor 2 of the 90 days before Go to line 7 S List below include pay | each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 years or both have primarily consu- ore you filed for bankruptcy, di | r debts? Immer debts. Consumer debt Id purpose." d you pay any creditor a total id a total of \$6,425* or more ints for domestic support oblig his bankruptcy case. s after that for cases filed on Immer debts. d you pay any creditor a total id a total of \$600 or more and | in one or more payr gations, such as chi or after the date of al of \$600 or more? | e? ments and ti ld support a adjustment | ne total amount you nd alimony. Also, do |
| | Creditor' | s Name a | and Address | Dates of payme | ent Total amount | Amount you | Was this p | payment for |

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| Del | otor 1 | Quintina Terry | Document F | Page 37 of 52 | e number (if known) | | |
|-----|----------------------|--|---|--|---|---------------------------------|---|
| 7. | <i>Inside</i> of whi | in 1 year before you filed for bankruptcers include your relatives; any general parich you are an officer, director, person in ciness you operate as a sole proprietor. 11 nv. | tners; relatives of any gen- control, or owner of 20% of | eral partners; partner r more of their voting | erships of which yo g securities; and ar | u are a genera ny managing a | al partner; corporations agent, including one for |
| | ■ ! □ ` | No Yes. List all payments to an insider. der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | inside Includ | de payments on debts guaranteed or cosig | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an |
| | | Yes. List all payments to an insider der's Name and Address | Dates of payment | Total amount | Amount you still owe | Reason for | this payment litor's name |
| Par | rt 4: | Identify Legal Actions, Repossession | s. and Foreclosures | | | | |
| 9. | List al modif | in 1 year before you filed for bankrupto Il such matters, including personal injury of ications, and contract disputes. No Yes. Fill in the details. In title | | | | | t or custody |
| | | e number | | court or agono, | | | |
| 10. | Check | n 1 year before you filed for bankruptc k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | rty repossessed, f | _ | hed, attached | |
| | Cred | litor Name and Address | Describe the Property Explain what happened | l | Date | | Value of the property |
| 11. | accol | in 90 days before you filed for bankrupt unts or refuse to make a payment beca No Yes. Fill in the details. | | uding a bank or fir | nancial institution | , set off any a | amounts from your |
| | Cred | litor Name and Address | Describe the action the | creditor took | Date : | action was | Amount |
| 12. | court | n 1 year before you filed for bankruptc -appointed receiver, a custodian, or an No Yes | | rty in the possess | ion of an assigne | e for the bend | efit of creditors, a |
| Par | | List Certain Gifts and Contributions | | | | | |
| | Withi | n 2 years before you filed for bankrupt | cy, did you give any gifts | with a total value | of more than \$60 | 0 per person | ? |
| | _ | No Yes. Fill in the details for each gift. | | | | | |
| | | s with a total value of more than \$600 person | Describe the gifts | | Dates the gi | you gave | Value |

Address:

Person to Whom You Gave the Gift and

Case 18-11428 Doc 1 Filed 04/19/18 Entered 04/19/18 12:25:24 Page 38 of 52 Document Debtor 1 ase number (if known) Quintina Terry 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Office of Richard S. Bass \$800.00 **Attorney Fees** 2021 Midwest Rd Suite #200 Oak Brook, IL 60523 rbass@corpoffices.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ No

Yes Fill in the details

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 Quintina Terry

| | Person Who Received Transfer Address Person's relationship to you | Description and v property transferr | | payme | pe any property or nts received or debts exchange | Date transfer was made |
|-----|---|--|---------------------------|------------------|---|---|
| | Rozette Terry 4542 Whitney Dr Hanover Park, IL 60133 | 2003 Infinity Q3 | 5 | Debto \$300.0 | r sold vehicle for 0 | March 2018 |
| | Son | | | | | |
| 19. | Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protein No ☐ Yes. Fill in the details. | | y property to a s | elf-settled | trust or similar device of | of which you are a |
| | Name of trust | Description and v | alue of the prop | erty transf | erred | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, Instru | uments, Safe Deposit | t Boxes, and Sto | rage Units | | mado |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa | other financial accour | nts; certificates o | of deposit | | |
| | ■ No □ Yes. Fill in the details. | nons, and other mar | | • | | |
| | | ast 4 digits of ccount number | Type of accourtinstrument | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed for | bankruptcy, any | / safe dep | osit box or other deposi | tory for securities, |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe t | he contents | Do you still have it? |
| | Chase Bank 439 W. Schick Rd Bloomingdale, IL 60133 | Debtor | | - | sonal papers & ts, certificates | □ No ■ Yes |
| 22. | Have you stored property in a storage unit or p | place other than your | home within 1 y | ear before | you filed for bankrupto | y? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe t | he contents | Do you still have it? |
| Par | t 9: Identify Property You Hold or Control for | r Someone Else | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Inclu | ude any property | you borro | owed from, are storing f | or, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe t | he property | Value |

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Case number (if known) Document

Debtor 1 **Quintina Terry**

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

| | | to own, operate, or utilize it, including disposal sites. | | | | | | | |
|-----|---|---|--|------------|---|--------------------|--|--|--|
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |
| Rep | ort all not | ices, releases, and proceedings tha | at you know about, regardless of when | they | occurred. | | | | |
| 24. | Has any | governmental unit notified you that | you may be liable or potentially liable | unde | er or in violation of an environm | ental law? | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Address | site Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you ■ No | ı notified any governmental unit of | any release of hazardous material? | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Address | site (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you | ı been a party in any judicial or adn | ninistrative proceeding under any envir | ronm | nental law? Include settlements | and orders. | | | |
| | ■ No □ Yes | Fill in the details. | | | | | | | |
| | Case Tit Case Nu | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nati | ure of the case | Status of the case | | | |
| Pai | rt 11: Giv | ve Details About Your Business or | Connections to Any Business | | | | | | |
| 27. | Within 4 | years before you filed for bankrupt | cy, did you own a business or have an | v of t | the following connections to any | / business? | | | |
| | _ | , | n a trade, profession, or other activity, | • | | • | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | | n officer, director, or managing ex | ecutive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |
| | ■ No. | None of the above applies. Go to F | art 12. | | | | | | |
| | ☐ Yes | . Check all that apply above and fill | in the details below for each business | i . | | | | | |
| | Busines Address (Number, S | | Describe the nature of the business Name of accountant or bookkeeper | | Employer Identification numbe Do not include Social Security | | | | |
| | (110111001) | | name of accountant of bookkeeper | | Dates business existed | | | | |
| | | | | | | | | | |

Page 41 of 52 Case number (if known) Document Debtor 1 Quintina Terry 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Quintina Terry **Quintina Terry** Signature of Debtor 2 Signature of Debtor 1 Date April 18, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Doc 1

Filed 04/19/18

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | mation to identify your | case: | | |
|-----------------------------------|--|-----------------------|--|--|
| Debtor 1 | Quintina Terry | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| If you are an ind | | pter 7, you must fil | viduals Filing Under C | Shapter 7 12/15 |
| _ | sed personal property a | | ot expired | |
| You must file thi | is form with the court wever is earlier, unless th | ithin 30 days after | you file your bankruptcy petition or by t | the date set for the meeting of creditors, opies to the creditors and lessors you list |
| | eople are filing togethe | r in a joint case, bo | th are equally responsible for supplying | correct information. Both debtors must |
| | and accurate as possibour name and case nur | | s needed, attach a separate sheet to this | form. On the top of any additional pages, |
| | | | | |
| Part 1: List Y | our Creditors Who Hav | e Secured Claims | | |
| 1. For any credit | ors that you listed in Pa | art 1 of Schedule D | : Creditors Who Have Claims Secured b | y Property (Official Form 106D), fill in the |
| information be Identify the cr | elow. editor and the property t | hat is collateral | What do you intend to do with the prosecures a debt? | operty that Did you claim the property as exempt on Schedule C? |
| | | | scoures a dest: | as exempt on senedule of |
| | | | | |
| | lissan Motor Accepta | ance | Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | ■ v |
| Description of | 2017 Nissan Sentr | а | Retain the property and enter into a | ■ Yes |
| property | Location: 4542 Wh | | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt | Hanover Park IL 6 |)133 | | |
| | | | | |
| | our Unexpired Persona | | in Sahadula O. Fusautam Contrasta on | d Unaversity d Lancas (Official Forms 4000) fil |
| in the information | on below. Do not list rea | al estate leases. Un | | d Unexpired Leases (Official Form 106G), fil n effect; the lease period has not yet ended. c. § 365(p)(2). |
| | | | | |
| Describe your u | inexpired personal pro | perty leases | | Will the lease be assumed? |
| Lessor's name: | | | | □ No |
| Description of lea | ased | | | |
| Property: | | | | ☐ Yes |
| Lessor's name: | | | | □ No |
| Description of lea | ased | | | □ NO |
| Property: | | | | ☐ Yes |
| Lessor's name: | | | | □ No |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Deb | otor 1 | Quintina Terry | Case number (if known) | |
|-----|----------|--|---|-------------------------------|
| Des | scriptio | n of leased | | |
| Pro | perty: | | | ☐ Yes |
| Des | | ame: n of leased | | □ No |
| Pro | perty: | | | ☐ Yes |
| | sor's na | ame: n of leased | | □ No |
| Pro | perty: | | | ☐ Yes |
| | sor's n | ame: n of leased | | □ No |
| Pro | perty: | | | ☐ Yes |
| | sor's n | ame: n of leased | | □ No |
| | perty: | | | ☐ Yes |
| Par | t 3: | Sign Below | | |
| | | alty of perjury, I declare that I have in nat is subject to an unexpired lease. | dicated my intention about any property of my estate that see | cures a debt and any personal |
| Χ | /s/ Q | uintina Terry | X | |
| | | atina Terry ature of Debtor 1 | Signature of Debtor 2 | |
| | Date | April 18, 2018 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation | |
|------------|---|--------------------|---|
| \$24 | 5 | filing fee | _ |
| \$75 | 5 | administrative fee | |
| + \$1 | 5 | trustee surcharge | |
| \$33 | 5 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-11428 Doc 1 Filed 04/19/18 Entered 04/19/18 12:25:24 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Quintina Terry | | Case No |) . | |
|-------------|---|---|---|------------------------------------|-------------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPI | ENSATION OF ATTO | RNEY FOR I | DEBTOR(S) | |
| (| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 202 compensation paid to me within one year before the fine rendered on behalf of the debtor(s) in contemplation | ling of the petition in bankruptcy | , or agreed to be pa | id to me, for services | |
| | For legal services, I have agreed to accept | | \$ | 800.00 | |
| | Prior to the filing of this statement I have receive | d | \$ | 800.00 | |
| | Balance Due | | | 0.00 | |
| 2. 7 | Γhe source of the compensation paid to me was: | | | | |
| | \blacksquare Debtor \square Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed cor | mpensation with any other person | unless they are me | mbers and associate | s of my law firm. |
| | ☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the r | | | | y law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ts of the bankruptcy | case, including: | |
| l | Analysis of the debtor's financial situation, and renote. Preparation and filing of any petition, schedules, steresentation of the debtor at the meeting of credit. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on headers. | tatement of affairs and plan which litors and confirmation hearing, a preduce to market value; ex tions as needed; preparation | n may be required; nd any adjourned h emption plannin | earings thereof; g; preparation an | d filing of |
| 6.] | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding. | fee does not include the following dischargeability actions, jud | g service: icial lien avoidar | nces, relief from s | tay actions or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of a ankruptcy proceeding. | any agreement or arrangement fo | r payment to me fo | representation of th | e debtor(s) in |
| Α | pril 18, 2018 | /s/ Richard S. Ba | ss | | |
| D | ate | Richard S. Bass | | | |
| | | Signature of Attorn Law Office of Ric | • | 'D | |
| | | 2021 Midwest Ro | oad | | |
| | | Suite #200 Oak Brook, IL 60 | 523 | | |
| | | 630-953-8655 Fa | ax: 630-953-8687 | | |
| | | rbass@corpoffic | es.com | | |
| | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| | | 1 (of their Bistrict of Immors | | |
|-------|--|---------------------------------------|------------------------------|----------------|
| In re | Quintina Terry | | Case No. | |
| | - | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR N | MATRIX | |
| | | Number o | f Creditors: | 26 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | itors is true and correct to | the best of my |
| Date: | April 18, 2018 | /s/ Quintina Terry Quintina Terry | | |

Adventist Glen Oaks Hospital PO BOX 4657 RE Patient Accts Oak Brook, IL 60522

Capital One Attn: Bankruptcy Dept PO BOX 30285 Salt Lake City, UT 84130-0285

Chase Card Services 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920

Chase Card Services 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920

Chase Card Services 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920

Chase Card Services 201 N. Walnut Street Mark Pascale Mail Stop DE1-1406 Wilmington, DE 19801-2920

Citi

Attn: Bankruptcy Dept PO BOX 6500 Sioux Falls, SD 57117

Citi

Attn: Bankruptcy Dept PO BOX 6500 Sioux Falls, SD 57117

Citi

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Comenity Bank/Ashley Stewart Attn: Bankruptcy Dept PO BOX 182125 Columbus, OH 43218-2125

Comenity Bank/Capital One Fore Attn: Bankruptcy Dept PO BOX 182125 Columbus, OH 43218-2125

Comenity Bank/Carsons Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Victoria s Secret Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125

Comenity/Meijer Attn: Bankruptcy Dept PO BOX 182125 Columbus, OH 43218-2125

DuPage Dental Care 206 N. Gary Ave RE: Patient Accts Carol Stream, IL 60188

Firdaus Jafri DDS 206 N. Gary Ave RE Patient Accts Carol Stream, IL 60188

Kohls
Attn: Bankruptcy Dept
PO BOX 3043
Milwaukee, WI 53201-3043

Macy s
Attn: Bankruptcy Processing
PO BOX 8053
Mason, OH 45040

Navient Student Loan Svcs Attn: Bankruptcy Dept PO BOX 9500 Wilkes Barre, PA 18773-9500

Nissan Motor Acceptance Attn: Bankruptcy Dept PO BOX 660366 Dallas, TX 75266-0366

Sears/CBNA Attn: Bankruptcy Dept PO BOX 6282 Sioux Falls, SD 57117-6282

Synchrony/BP Attn: Bankruptcy Dept PO BOX 965061 Orlando, FL 32896-5061

Synchrony/JC Penney Attn: Bankruptcy Dept PO BOX 965061 Orlando, FL 32896-5061

Synchrony/Wal Mart Attn: Bankruptcy Dept PO BOX 965061 Orlando, FL 32896-5061

Synchrony/Wal Mart Attn: Bankruptcy Dept PO BOX 965061 Orlando, FL 32896-5061

Target National Bank Attn: Bankruptcy Dept PO BOX 660170 Dallas, TX 75266-0170